

**I. AMENDMENTS TO THE CLAIMS**

This listing of claims shall replace all prior versions, and listings, of claims in the application.

**Listing of Claims**

1-37. (cancelled)

38. (currently amended): A method of ~~effectively~~ treating pain in humans consisting of

orally administering to a human patient an oral dosage form consisting essentially of (a) two analgesic compounds and/or pharmaceutically acceptable salts thereof consisting of

(i) a COX-2 inhibitor selected from meloxicam and/or at least one pharmaceutically acceptable salt thereof and

(ii) oxycodone and/or at least one pharmaceutically acceptable salt thereof; and

(b) a sustained release carrier,

wherein the meloxicam is in an amount from about 0.5 mg to about 1500 mg;

the oxycodone is in an amount from 2.5 mg to 800 mg; and

the sustained release carrier is in an amount which causes a sustained release of (i) the meloxicam and (ii) the oxycodone when the dosage form contacts gastrointestinal fluid and provides a therapeutic effect for about 12 hours or longer.

39- 46. (cancelled):

47. (previously presented): The method of claim 38, wherein the ratio of the oxycodone to the meloxicam is from about 0.0001:1 to about 1:1.

48. (previously presented): The method of claim 38, wherein the oxycodone is present in the pharmaceutically acceptable salt form.

49-52. (cancelled)

53. (previously presented): The method of claim 38, wherein said sustained release carrier is selected from the group consisting of an alkylcellulose; a hydroxyalkylcellulose; an acrylic polymer; a fatty acid; a fatty alcohol; a glyceryl ester of fatty acids; a mineral oil or wax; a vegetable oil or wax; a polyalkylene glycol; shellac; zein; and mixtures of any of the foregoing.

54. (previously presented): The method of claim 38, wherein said pain is cancer pain, post-surgical pain, low back and neck pain, dysmenorrheal, headache, toothache, pain from sprains and strains, myositis, neuralgia, synovitis, arthritis, degenerative joint diseases, gout, ankylosing spondylitis, bursitis, burns, injuries, influenza or other viral infections, or common cold.

55. (currently amended): A method of ~~effectively~~ treating moderate to severe pain in humans consisting of

orally administering to a human patient an oral dosage form consisting essentially of (a) two analgesic compounds and/or pharmaceutically acceptable salts thereof consisting of

(i) a COX-2 inhibitor selected from meloxicam and/or at least one pharmaceutically acceptable salt thereof and

(ii) oxycodone and/or at least one pharmaceutically acceptable salt thereof; and

(b) a sustained release carrier,

wherein (a) said meloxicam is in an immediate release form and (b) said oxycodone is in a sustained release form, and the sustained release carrier in an amount which causes a sustained release of the oxycodone for about 8 to 24 hours when the dosage form contacts gastrointestinal fluid.

56. (previously presented): The method of claim 55, wherein said sustained release carrier is selected from the group consisting of an alkylcellulose; a hydroxyalkylcellulose; an acrylic polymer; a fatty acid; a fatty alcohol; a glyceryl ester of fatty acids; a mineral oil or wax; a vegetable oil or wax; a polyalkylene glycol; shellac; zein; and mixtures of any of the foregoing.

57. (previously presented): The method of claim 55, wherein said pain is cancer pain, post-surgical pain, low back and neck pain, dysmenorrheal, headache, toothache, pain from sprains and strains, myositis, neuralgia, synovitis, arthritis, degenerative joint diseases, gout, ankylosing spondylitis, bursitis, burns, injuries, influenza or other viral infections, or common cold.

58. (previously presented): The method of claim 55, wherein said dosage form comprises particles, wherein said particles have diameter from about 0.1 mm to about 2.5 mm.

59. (previously presented): The method of claim 58, wherein said particles have diameter from about 0.5 mm to about 2 mm.

60. (previously presented): The method of claim 55, wherein the meloxicam is coated onto a tablet comprising oxycodone in sustained release form.

61. (previously presented): The method of claim 55, with said sustained release carrier being (i) a sustained release coating; or (ii) incorporated into a matrix with said oxycodone.

62. (withdrawn): The method of claim 55, wherein said oral dosage form provides a therapeutic effect of said oxycodone for about 24 hours.

63. (previously presented): The method of claim 38, wherein the oral dosage form is administered twice-a-day.

64. (previously presented): The method of claim 55, wherein the oral dosage form is administered twice-a-day.

65. (currently amended): A method of ~~effectively~~ treating pain in humans consisting of:

(a) combining (i) a COX-2 inhibitor selected from meloxicam or a pharmaceutically acceptable salt thereof, (ii) a sustained release material and (iii) oxycodone or a pharmaceutically acceptable salt thereof into an oral dosage form, and

(b) orally administering the dosage form to a human patient,  
wherein the sustained release carrier is in an affective amount to cause a sustained release of (i) the meloxicam and/or (ii) the oxycodone when the dosage form contacts gastrointestinal fluid.

66. (previously presented): The method of claim 65, wherein said oral dosage form provides the sustained release for about 8 to 24 hours.

67. (previously presented): The method of claim 65, wherein the dosage form is administered twice-a-day.

68. (currently amended): A method of ~~effectively~~ treating pain in humans consisting of

orally administering to a human patient an oral dosage form which combines

(a) two analgesic compounds and/or pharmaceutically acceptable salts thereof consisting of (i) a COX-2 inhibitor selected from meloxicam or a pharmaceutically acceptable salt thereof and (ii) oxycodone or a pharmaceutically acceptable salt thereof; and

(b) a sustained release carrier,  
wherein the sustained release carrier is in an amount which causes a sustained release of (i) the meloxicam and/or (ii) the oxycodone when the dosage form contacts gastrointestinal fluid.

69. (previously presented): The method of claim 68, wherein said oral dosage form provides the sustained release for about 8 to 24 hours.

70. (previously presented): The method of claim 68, wherein the dosage form is administered twice-a-day.

71. (new): The method of claim 38, wherein the amount of the COX-2 inhibitor administered is lower than the amount of the COX-2 inhibitor that would normally be required to produce analgesia when the COX-2 inhibitor is used alone.

72. (new): The method of claim 55, wherein the amount of the COX-2 inhibitor administered is lower than the amount of the COX-2 inhibitor that would normally be required to produce analgesia when the COX-2 inhibitor is used alone.

73. (new): The method of claim 65, wherein the amount of the COX-2 inhibitor administered is lower than the amount of the COX-2 inhibitor that would normally be required to produce analgesia when the COX-2 inhibitor is used alone.

74. (new): The method of claim 68, wherein the amount of the COX-2 inhibitor administered is lower than the amount of the COX-2 inhibitor that would normally be required to produce analgesia when the COX-2 inhibitor is used alone.